## PINELLAS COUNTY FIRE SERVICE PARAMEDICS PERSPECTIVES ON COMMUNITY BASED HEALTHCARE SERVICES

#### STRATEGIC MANAGEMENT OF CHANGE

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#### ABSTRACT

Pre-hospital and non-emergent medical care and who provides it continues to evolve and change. The problem is that Pinellas County, Florida fire service agencies wishing to provide community based healthcare services have not sought input from the workers that will eventually provide the service. This research project analyzed effective methods for employee involvement in new service provision. The purpose of this research project was to provide information on change management and identify fire service paramedics sentiment and ideas concerning community based health care.

Descriptive and evaluative research methods were used to answer the following research questions:

- What is the current management philosophy on employee involvement with changes in the workplace?
- 2. Have any Florida fire service EMS providers, currently providing community based healthcare services, investigated their workforce's feelings about the new service?
- 3. What opinions do Pinellas County fire service paramedics have regarding expanded roles in community based healthcare services?

Procedures utilized included: review of written material on employee involvement in workplace change; surveys of Florida fire service professionals; and surveys of Pinellas fire service paramedics.

The findings of the research show that employees must be involved in change management for organizational success. Pinellas fire service paramedics had strong

opinions and many ideas for community based healthcare service provision. Most Florida fire departments had not sought their employee's involvement in their programs.

The recommendations of the research were: for fire service leaders to further discuss community based healthcare services and this research, to create an educational program for paramedics concerning community based healthcare, and to continue research.

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#### INTRODUCTION

The City of Oldsmar Fire Department provides Advanced Life Support (ALS) Emergency Medical Services (EMS) to the community. The provision of EMS is through a contract with Pinellas County government. Fifteen other fire-service based EMS providers within Pinellas County also contract with the County to provide pre-hospital emergency medical services. Changes within the Federal government and the insurance industry are precipitating the idea of community based health care services to reduce injury and prevent illness. Pinellas fire service leaders have begun discussions on the feasibility of fire service paramedics delivering some sort of community based healthcare services. The problem is that Pinellas fire service agencies wishing to provide community based healthcare services have not sought input from the workers that will eventually provide the service.

The purpose of this research project was to provide information on change management and identify fire service paramedics sentiment and ideas concerning community based health care. Pinellas fire service leaders, utilizing this information, will be prepared for moving forward with the new service delivery program.

Descriptive and evaluative research methods were used to answer the following research questions:

- What is the current management philosophy on employee involvement with changes in the workplace?
- 2. Have any Florida fire service EMS providers, currently providing community based healthcare services, investigated their workforce's feelings about the new service?

3. What opinions do Pinellas County fire service paramedics have regarding expanded roles in community based healthcare services?

#### BACKGROUND AND SIGNIFICANCE

### Oldsmar Fire Department

The Oldsmar Fire Department provides fire and emergency services to the municipality of Oldsmar located in Pinellas County, Florida. The Oldsmar Fire Department provides services utilizing a combination department comprised of 15 career positions and 10 volunteer positions. The department operates from a single station and serves a resident population of 10,000. Oldsmar Fire Department is one of 20 fire and emergency services departments within Pinellas County. The other fire departments range from municipal fire departments, to dependent fire districts contracted to Pinellas County government for services, or independent special districts authorized by the State legislature to provide services. This diverse group has functionally consolidated many redundant functions, some with the help of Pinellas County government. Pinellas County oversees the 911 Public Safety Answering Point (PSAP) and dispatches all fire departments within the county. Pinellas County also provides Emergency Medical Services (EMS) through contracts with 17 fire service agencies for Advanced Life Support First Responder Services. The County also contracts with American Medical Response (AMR) for ambulance transport.

An automatic aid agreement exists between all providers. This agreement eliminates jurisdictional lines and ensures that the closest unit to an emergency incident is sent regardless of the community the event occurs in. The fire departments share a common set of Standard Operating Procedures and utilize group purchasing for

equipment like fire hose, protective clothing, and many other items. The functional consolidation of fire and EMS services within Pinellas County brought together over sixty fire stations and 1,200 fire fighters to provide emergency service to a resident population of almost one million people.

#### Emergency Medical Services

The City of Oldsmar contract with Pinellas County for the provision of Advanced Life Support (ALS) First Responder Services is identical to the contracts with 16 other providers. The contract went into effect October 1, 1997, and had a ten-year term. The contract provided language for the potential delivery of alternative forms of medical service including non-emergency medical services. The similarity of contracts and functional consolidation lead this research project to examine the problem not just for the City of Oldsmar Fire Department organization but for the fire service team of EMS contractors within Pinellas County.

#### National Fire Academy Research

Past research by McGuff (1998) into the use of fire service paramedics in Pinellas County to provide community based healthcare created the following recommendations:

- The Oldsmar Fire Department should facilitate a meeting with other
   Pinellas fire service EMS providers for the purpose of opening a dialogue on community based healthcare services.
- The Pinellas County fire service EMS providers should meet with Pinellas
  County public health officials and identify methods and procedures to
  unify community health services provision.

 More research should be conducted on those fire service EMS providers that are currently providing community based healthcare services.

The recommended meetings have been occurring in the latter portion of 1998. The need for more research was needed. Pinellas fire service agencies were moving forward with discussions on community based healthcare entry points and needed employee involvement and input.

This research project attempted to provide pertinent information for Pinellas

County fire service leaders to utilize when deciding the direction to be taken dealing with

community based healthcare provision.

#### Employee Involvement

In his work, *Thriving on Chaos*, author Tom Peters (1987), gives some insight into where employee involvement in the workplace has been. Peters' quotes Lemuel Bouleware, a General Electric industrial relations executive, who made the following comments to top GE executives after an employee strike in 1946:

Something happened that must not happen again. Somewhere, somehow, the employees got the idea that they were in the driver's seat. That they had control in their hands. This is an attitude, gentleman, that must be reversed. This is the fantasy that must be eradicated (p.341).

Author Peters goes on to quote Frank Borman, former astronaut and then chairman of Eastern Airlines, who in 1986 commented when questioned about employee involvement at Eastern said, "I'm not going to have the monkeys running the zoo" (p.343). Several years after this comment Eastern Airlines went out of business and sold most of its air fleet off to pay creditors.

Today, the trend in both the private and public sectors is to involve employees in business decisions. Osborne and Gaebler (1993) cite many examples where government succeeded in eliminating bureaucracy by embracing participatory management.

Administrators and managers must be willing to empower employees and seek their input on innovating new service delivery methods (Heckerson, 1998). To be successful in any endeavor management must involve their employees in everything (Coleman, 1995; Heckerson, 1998; Peters, 1987).

Pinellas fire service leaders can learn from the past and succeed in the future using new employee involvement techniques. Not to do so could prove disastrous for the implementation of any new services.

This paper was prepared to satisfy the applied research project requirements associated with the Strategic Management of Change course at the National Fire Academy (NFA). A significant portion of that course was devoted to the discussion of organizational change and the employee's role in the change process. This research related to the area of change management by reviewing current management theory on workplace change. It also identified employee attitudes and ideas concerning entry into community based healthcare services.

#### LITERATURE REVIEW

#### Change Management Theory

Many, if not hundreds, of books have been written on management theory.

Today's latest good management teachings focus on employee involvement and
employee empowerment. California State Fire Marshal Ronnie Coleman (1995) said:

Someone once said that if you really want to get someone to like you, don't talk about yourself but ask them to talk about themselves. When you are going through this transition period, the period of time you spend with the existing organization finding out their likes and dislikes might reveal an interesting surprise: They might want to do exactly what you want to do (p.40).

Coleman reminds us that by simply listening to our employees, administrators, who may be worrying about a service delivery change, could be pleasantly surprised that the workforce endorses such change. The change process is not a picnic for top managers. It is as difficult to watch it happening as it is too directly experience it (Brugeman, 1998). Carter (1998) recommends to not over look any crucial player in the change process. Leaving out certain people will create ill will, slow the implementation, and possibly even kill the intended change.

Wholesale involvement of employees is necessary to create the level of quality service and flexibility an organization needs. Managers must actively listen to workers (Peters, 1987). Peters (1987) states this includes the use of informal meetings and the use of formal surveys. Winn's (1997) survey results were critical to developing reasonable, achievable recommendations. McGuff's (1998) earlier research also used surveys to determine the sentiment of policy makers. A survey instrument was used in this research project to seek employee input. Prior to Managed Care Organizations (MCO) entering communities, fire service EMS agencies must attempt to understand how their systems work. They must identify areas where improved performance can be obtained (Scott, 1996). Prior to making significant changes in policy or procedures administrators must do their homework (Coleman, 1995). Shultz (1996) believes that to be successful at

implementing change, consensus must be achieved with everyone. This includes the front line workers who will live the plan on a daily basis. No one will have a better idea of how things should be done than those who are doing the job (Heckerson, 1998). The bottom line is to involve everyone in everything (Peters, 1987).

#### Teams

Kruger (1998) recommends that if you want the organization to go places, don't go it alone. If you are leading a big change in a large organization your best ally may be a great partner. That partner may well be an employee team. For change to be successful the leader must maximize the opportunity for people to have input into the change process (Coleman, 1995). Team building provides those opportunities. Pull the ownership of programs and policies out of the bureaucracy and put it into the hands of those who must deal with them (Gaebler, Osborne, 1993). Managers must be guided by one simple axiom: There are no limits to the ability to contribute on the part of a properly selected, well-trained, appropriately supported, and above all, committed person (Peters, 1987). Carter (1998) recommends that task groups work on problems and change initiatives. The advantage of the group is the combination of different ways of thinking and different points of view.

Participatory management decentralizes authority and eliminates bureaucracy (Gaebler, Osborne, 1993). The team management approach is necessary to catalyze all levels of the organization to solve problems. Paige (1995) discusses the implementation of innovation teams in three private sector companies. The teams were made up of employees from all organizational areas. The teams were challenged to create solutions to short term organizational problems. Once that was accomplished, they worked on long

term plans to develop a vision of what the organization would look like in the future. Two of the three achieved the short-term goals and progressed to implement the long range goals. The methods and techniques used in the business sector can be directly applied to emergency service organizations (Paige, 1995).

If you want employee involvement in seeking methods of innovating service delivery empower them (Heckerson, 1998). The organization and its' managers must be willing to include all levels of personnel in the planning process, from the bottom to the top (Shultz, 1996). Many cases have been reported where inadvertent employee involvement has lead to innovation and solutions to problems (Peters, 1987). Gaebler and Osborne (1993) devote a chapter to empowerment of communities to solve their own problems. Analogies can be made to the workplace. No one knows better the situation than those there. The bottom line is, involve employees in everything the organization does.

For successful change management to occur extensive education and training should take place at all levels of the organization (Paige, 1995). Coleman (1995) recommends educating the workforce to prevent organizational backlash to change.

Teams must receive training in innovation skills (Paige, 1995). These skills include active listening, idea development, and different types of thinking.

#### Reasons for Failure

Over half of all changes attempted in organizations fail (Maurer, 1996). The number one reason for failure is management's failure to tap the work forces potential (Peters, 1987). "People do not believe that they are the ones coming up with the big plan; they think they are just being manipulated by top management" (Grayson, 1995, p. 8).

Paramedics in Indiana worked to halt a statewide plan for extended scope paramedic practices (Lipowitz, 1995). The paramedics did not want to go through new training or take on new responsibilities. They did this even though the effect on them had not been determined. Organizations must respect the values of EMS providers or risk backlash from those who must make it work (Winn, 1997).

Resistance is nothing more than people trying to protect themselves from harm. How managers handle resistance is what causes problems (Maurer, 1996). All new ideas must be listened to and bounced around. If they are routinely dismissed the workforce will feel the effort for change is a waste of time (Paige, 1995). Employees have to want to perform the new work or it will not be successful (Lipowitz, 1995). Employees can move mountains if only we ask them to and ask them how to do it (Peters, 1987).

#### **PROCEDURES**

#### Definition of Terms

For the purpose of this study, the following definition applied:

<u>Community Based Healthcare Services</u>. Capabilities that may be offered within a neighborhood or community to aid in the detection, surveillance, and support of community health.

#### Research Methodology

The research procedures used in preparing this paper began with a literature review at the St. Petersburg Junior College Health Center Library in St. Petersburg, Florida. Additional literature review was conducted at the Oldsmar Public Library in Oldsmar, Florida, as well as the Oldsmar Fire Department's periodical resources. The literature review was assisted by Internet searches for journal articles dealing with the

subject. When an article was found on the Internet, it was noted for research at the library to identify the primary source.

Two survey instruments were developed. The first survey instrument, called the "Florida Fire Service Community Based Health Care Services Employee Involvement Survey" (see Appendix A), was sent to 17 Advanced Life Support (ALS) State licensed providers. The mailing list for the providers was created from previous National Fire Academy (NFA) research that identified Florida fire service EMS providers doing community based healthcare activities (McGuff, 1998). A self-addressed stamped envelope was provided for the surveys return. The purpose of the survey was to identify if any of these providers had sought their employee's opinions or ideas prior to implementing their community based healthcare programs. A number of specific questions were asked, including: (a) population of community served; (b) type of department; (c) number of employees; (d) number of annual EMS responses; (e) number of annual community based healthcare contacts; (f) type of personnel performing community healthcare activities; (g) was employee input sought. Of the 17 surveys, 12 (70 percent) were completed and returned.

The second survey instrument was called the "Pinellas Fire Service Community Based Healthcare Services Paramedic Survey" (see Appendix B). The surveys were distributed to all Pinellas fire service agencies providing Advanced Life Support (ALS) EMS services. Each agency was asked to distribute the surveys to their paramedics and collect the completed surveys for pick up at a later date. A total of 435 surveys were distributed. The purpose of the survey was to determine the knowledge, sentiment, and ideas that Pinellas fire service paramedics had concerning community based healthcare

services. A number of specific questions were asked, including: (a) age; (b) years in the fire service; (c) years as a paramedic; (d) average number of EMS incidents responded to per day; (e) who should perform community based healthcare; (f) former knowledge of community based healthcare; (g) interest in expanding paramedic role; (h) interest in expanding skills and knowledge. Of the 435 surveys distributed, 154 (35 percent) were returned.

The results of both surveys were tabulated, analyzed, and used to answer the research questions. The results of the survey instruments are provided in Appendix C and in Appendix D.

#### Assumptions and Limitations

This research was limited by a number of factors and assumptions. It was assumed that distributed surveys would reach most Pinellas fire service paramedics. It was assumed that the fire service paramedics and community based healthcare providers were truthful in their answers. No test of either survey instrument was done prior to mailing and distribution. A test may have revealed the need for refined questions or additional questions. Survey respondents were not precluded from checking more than one answer to demographic questions or service provider choices. They were also not precluded from leaving certain answers blank. The review of the completed surveys was done manually. No relational database software was available to the writer for his use.

The fire service in Pinellas County is currently exploring options to bid on a contract for EMS transport services. Some fire service paramedics may have completed their survey in a biased favoritism towards the fire service.

#### RESULTS

#### Answers to Research Questions

1. What is the current management philosophy on employee involvement with changes in the workplace?

The literature review in this research paper contains many examples of current management thought and philosophy on change management. Brugeman (1998) quotes Peter Drucker's advice dealing with change:

Pick the future against the past, focus on opportunity rather than on problems, choose your own direction rather than climb on the bandwagon, aim high, aim for something that will make a difference rather than something that is safe and easy to do (p. 28).

Perhaps the best recommendation for approaching workplace changes is to take a triangle approach (Coleman, 1995). The triangle consists of educating the employees (Paige, 1995). This can be done in formal classroom settings or in more informal ways. Informal education may be ensuring the type of literature in the fire stations contains information you are interested in personnel learning. Seminars and conferences are good tools for new information to be found. Once the education process has occurred allow the idea to incubate for awhile. Let the employees think about what they have learned. This process will lead to questions and comments that may strengthen the change initiative. Once this stage is reached it is time to implement the idea.

The fire service administrator will be well served to remember one thing: Involve everyone in everything (Peters, 1987). Create teams to tackle problems and change initiatives within the organization. Teams will bring different perspectives to the problem

solving (Carter, 1998). Maximize the opportunity for people to have input into the change process (Coleman, 1995). Pull ownership of policies and procedures away from administrators and top echelons and put it into the hands of those who must deal with them (Gaebler, Osborne, 1993). Tom Peters (1987) quotes Rosabeth Kanter of the Harvard Business School, "Powerlessness corrupts. Absolute powerlessness corrupts absolutely" (p.343). Administrators must seek to involve employees in every facet of the organization (Shultz, 1996). Failure to do so will result in employees feeling manipulated and lead to organizational failure (Grayson, 1995; Peters, 1987).

2. Have any Florida fire service EMS providers, currently providing community based healthcare services, investigated their workforce's feelings about the new service?

Previous research by McGuff (1998) sent 128 surveys to fire service based advanced life support EMS licensed providers in Florida. Ninety-seven of the surveys were returned. Of those, 26 indicated that their departments were providing community based healthcare services. Seventeen of the 26 provided their addresses so that they could receive the survey results. Seventeen surveys were sent to the identified providers to assist in answering research question number two.

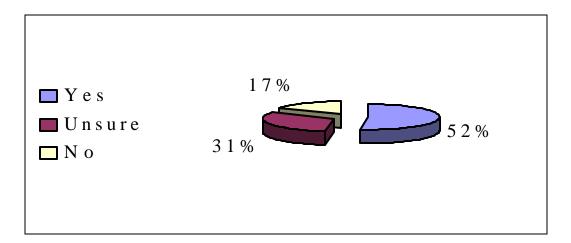
Question number six on the Florida Fire Service Community Based Health Care Services Employee Involvement Survey asked if the respondents agency had surveyed its' workforce for ideas and employee sentiment. Of the 12 surveys returned 10 responses to this question were given. Four respondents (40 percent) indicated they had surveyed their employees. Six respondents, (60) percent said they had not. Respondents answering

question six yes were asked to include any written survey used. One such instrument was received. See Appendix C for complete survey results.

3. What opinions do Pinellas County fire service paramedics have regarding expanded roles in community based healthcare services?

The Pinellas Fire Service Community Based Healthcare Services Paramedic Survey indicated 80 of the 154 paramedics surveyed, or 52 percent, were interested in seeing their role expanded as a provider of community based healthcare services. (See figure 1). Forty-eight (31 percent) were unsure about expanding their role. Twenty-six (17 percent) were opposed to expansion of paramedics into community based healthcare services. See Appendix D for complete survey results.

Figure 1



The survey also indicated that out of 152 responses 89, or 58 percent, of the paramedics surveyed had some knowledge of another fire service agency that had expanded into the provision of community based healthcare services. Sixty-three, or 42 percent, of the paramedics had no such knowledge.

When asked if they would be willing to expand their knowledge, skills, and abilities by attending additional education opportunities to provide community based

healthcare services 127 of 149 responses (85 percent) were yes. Twenty-two respondents, or 15 percent, were not interested in any educational opportunities.

The paramedic survey allowed respondents to select from a list of possible agencies that they believed should provide community based healthcare services. The choices provided were: county public health service; private healthcare provider; fire service based EMS; private EMS service; volunteer organization; and other. (See table 1). Those completing the survey could select more than one choice. All but one survey had at least one selection made to this question. One hundred-sixty-six organizational selections were made by paramedics answering this question on the survey. The choice most selected by paramedics (58 percent) was fire service based EMS. The second most often selected choice (31 percent) was county public health service.

Table 1

<u>Paramedic Organizational Selections for</u>

Community Based Healthcare Services

County Public Health Service	51
Private Healthcare provider	10
Fire Service Based EMS	96
Private EMS Service	2
Volunteer Organization	2
Other	5

Paige (1995) cites research that workplace change may be easier in organizations that have young employees. Paramedics in the age group 18 - 33 made up 42 percent (65

responses) of the total surveyed. Paramedics in the age group 34 and above made up 58 percent (89 responses) of the total surveyed. Sixty percent of the younger age group responded yes when asked if they would like to see their role in community based healthcare services expanded. The older age group responded yes only 47 percent of the time. Other age group comparisons can be made. (See Table 2). The 18 – 33 age group selected the fire service based EMS choice in question number three 65 percent of the time. The 34 and above age group made this selection 61 percent of the time.

Table 2

<u>Paramedic Survey Response</u>

<u>Comparison by Age Group</u>

Age Group 18 - 33	Age Group 34 and Above
2%	61%
0%	47%
2%	33%
2%	20%
5%	81%
2%	16%
	2% 0% 2% 2% 5%

The completed surveys were tracked by submission whether from a north Pinellas or south Pinellas fire service agency. Of the 154 completed surveys 76 were from north Pinellas; 76 were from south Pinellas; and two were of unknown origin. A comparison of the answers to question number five was done for north and south. (See Table 3). A

comparison of the answers to question number five was also done for north and south based on call volume. (See Table 4). The 154 completed surveys provided 153 responses to the call volume question. Of the 83 responses (54 percent) with seven or fewer calls per day, 46 (55 percent) answered yes to question number five. Seventy responses (45 percent) indicated eight or more calls per day. Of those, 34 (49 percent) answered yes to question number five.

Table 3

<u>Paramedic Survey Comparison of</u>

<u>Question Number Five – North vs. South</u>

	North		South	
Yes	42 of 76	(55%)	37 of 76	(49%)
Unsure	22 of 76	(29%)	26 of 76	(34%)
No	12 of 76	(16%)	13 of 76	(17%)

Table 4

<u>Paramedic Survey Comparison of Question</u>

Number Five by Call Volume – North vs. South

	North: 7 or fewer	South: 7 or fewer	North: 8 or more	South: 8 or more
Yes	27 of 45 (60%)	18 of 37 (49%)	15 of 31 (48%)	19 of 39 (49%)
Unsure	12 of 45 (27%)	14 of 37 (38%)	10 of 31 (32%)	12 of 39 (31%)
No	6 of 45 (13%)	5 of 37 (14%)	6 of 31 (19%)	8 of 39 (21%)

In south Pinellas surveys, 39 of the 76 (51 percent) respondents indicated they responded to eight or more EMS calls per day on average. Forty-nine percent indicated they went to seven or fewer call per day on average. In north Pinellas, 31 of the 76 (41 percent) respondents indicated they went to eight or more calls per day on average. Fifty-nine percent indicated they went to seven or fewer calls per day on average.

Question number five elicited a total of 26 no responses. Of that 26 responses 12 (46 percent) were from north Pinellas. Thirteen (50 percent) were from south Pinellas. One response could not be determined from the north or south. Those 26 respondents all provided responses to question number four on the survey. Thirteen (50 percent) indicated yes, they had some knowledge of community based healthcare services. The other thirteen indicated no, they had no such knowledge. Call volume statistics were reviewed for the 26 no responses to question number five. Fourteen respondents (54 percent) indicated they responded to seven or fewer EMS calls per day on average. Twelve respondents (46 percent) responded to eight or more EMS incidents per day on average.

Of the 26 no responses to question number five, 25 respondents provided responses to question number six. Question number six dealt with the paramedics desire to expand their skills through education and training to provide community based healthcare services. Eight of the 25 (32 percent) indicated yes, they would be interested in the training. Seventeen of the twenty-five (68 percent) indicated no, they would not be interested in training. Those respondents under the age of 34 answered question number five no eight (31 percent) times. Those respondents in the age groups 34 and over indicated no choices 18 (72 percent) times. Those that selected the no option to question

number five selected the county public health service option in question number three twenty times. (See Table 5). The 26 surveys with no indicated had 28 responses to question number three. The twenty selections of county public health service represented 71 percent of the 28 responses. It also represented 74 percent of the total surveys completed indicating the county public health service choice.

Table 5

<u>Paramedic Organizational Selections for Community Based Healthcare Services</u>

That Indicated No to Question Number Five

County Public Health Service	20
Private Healthcare provider	3
Fire Service Based EMS	4
Private EMS Service	1
Volunteer Organization	0
Other	0

Forty-eight (31 percent) of the 154 respondents chose the option, unsure, in response to question number five. Forty-four of the 48 provided a response to question number six dealing with training. Forty (90 percent) indicated yes. Four (9 percent) indicated no. Twenty-two (46 percent) of the 48 unsure responses were from north Pinellas. Twenty-six (54 percent) were from south Pinellas. Of the 48 that responded unsure to question number five, 25 (52 percent) answered yes to question number four. Twenty-three (48 percent) answered no.

Eighty (52 percent) of the 154 respondents chose the option, yes, in response to question number five. All eighty provided responses to question number six.

Seventy-nine (99 percent) indicated yes to question number six. One respondent (1 percent) chose the no option.

The paramedic survey question number seven asked the respondents to list services they felt they could provide in an expanded role. There were 450 responses to this question. Immunizations/Vaccinations was listed 98 times and represented 22 percent of the total responses. Health screening was listed in various forms 94 times and represented 21 percent of the total. The third most listed service was basic assessment of non-emergency patients. It was listed 73 times and represented 16 percent of the total responses. A complete list of services can be found in Appendix E.

The paramedic survey question number eight asked the respondents to list issues that may have to be dealt with as a paramedic in the delivery of community based healthcare services. There were 262 responses to this question. Liability and legal issues were listed 61 times (23 percent); training and education were listed 33 times (13 percent); and benefits were listed 30 times (11 percent). A complete list of services can be found in Appendix F.

Question number nine, on the paramedic survey, allowed the respondents to provide any additional comments. Comments ranged from, "Fire based home healthcare is not as far fetched as one may believe. As a tax funded organization we're often forced to justify our existence. The more of a product you can provide, the more valuable your services", to, "Whose the idiot that thought this up". A complete listing of the additional

comments is too cumbersome to be attached as an appendix. Those wishing to review the additional comments may contact the researcher.

#### DISCUSSION

The results of the literature review dealing with change management were daunting. The number of fire service leaders that will embrace giving so much authority to employees remains to be seen. The fire service has been run in a very autocratic fashion for many of years. It is anticipated that a lot of education in change management techniques will be needed in the fire service at the administrator level. However, the results of the paramedic survey, and the additional comments, should provide a glimpse of what the workforce is capable of coming up with. Many of the surveys had very positive comments and engaging ideas for consideration. The authors providing insight into change management equally distributed their work between public and private employers. This provides the foundation that allowing employee involvement in organizational change planning satisfies the individual not the employee.

The Florida fire service employee involvement survey was disappointing. Clearly, the idea of community based healthcare services is forward thinking in any fire department. Yet, relatively few of the organizations with programs sought their employees' involvement. Winn (1998) did perform a survey of the paramedics at his fire department as a part of his National Fire Academy research. In fact it was the writer's experiences at the NFA during the Strategic Management of Change course and Winn's research that prompted this research project. To be successful in the future fire service leaders must rely on employee involvement more.

Any organization that does undertake community based healthcare services must be ready to document those services. The Florida fire service surveys indicated that most of the departments had no statistics regarding citizen contacts. Record keeping will be an important and difficult portion of implementing community based healthcare services.

The paramedic survey was loaded with interesting information. The numbers of surveys returned were evenly distributed amongst age groups, call volume groups, and north or south Pinellas County. The reason for the geographical dividing line was the differences between urban and suburban communities. Southern Pinellas County is urbanized and has many old, established communities. Northern Pinellas County is much more suburban than southern Pinellas. Many of the communities are new or have recently undergone rapid growth. It was interesting to note that generally, the paramedics surveyed agreed on most responses regardless of the geography involved.

The tables in this research project attempted to indicate where the differences existed between responses. Age seems to be one of the clear categories for different responses. Clearly the younger respondents were more apt to select the fire service as the agency to do community based healthcare services. The younger age group also answered affirmatively more often to being willing to accept expanded roles. The older age group should not be discounted. There could be much to the saying, "Older but wiser".

It was interesting how many respondents that were not interested in expanded roles indicated they did not possess knowledge of a fire service agency providing community based healthcare services. Were these the traditional" nay sayers, resisting any change that comes their way? Since many of the respondents that were in this

category were in the older age group it can be surmised they are comfortable with their roles as they exist today.

The numbers of respondents indicating they were willing to attend training and education programs was very high. Almost 100 percent of those interested in expanded care roles were willing to attend educational opportunities. That shows an outstanding desire to be prepared for the future.

The number of possible services listed on the paramedic survey indicated that many of the respondents put great thought into their suggestions. The list is lengthy, diverse, and provides a starting ground for discussion. The issues cited that will need to be dealt with also provide a groundwork for discussion amongst fire service leaders and their employees. The additional comments included provide a deeper insight into the thoughts and expectations of the paramedics completing the survey. Special attention should be paid to these comments. They represent how the person feels towards the idea of community based healthcare services being in the fire service. Not how they think about it. Most often it is a person's feeling about something that spurs them to action.

#### RECOMMENDATIONS

The recommendations stemming from this study are:

- The Oldsmar Fire Department should facilitate a meeting with other
   Pinellas fire service EMS providers for the purpose of sharing the survey results from this research.
- An educational program for Pinellas fire service paramedics should be developed to better explain the concept of community based healthcare services.

- Pinellas fire service leaders should create cross-departmental teams for the purpose of discussing the list of possible services and the list of issues for possible solutions.
- 4. More research should be undertaken to determine the sentiment of healthcare providers outside the fire service on the issue of community based healthcare services.
- More research should be undertaken to determine the sentiment and need of residents within the Pinellas communities for community based healthcare services.

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## Appendix A

# Florida Fire Service Community Based Health Care Services Employee Involvement Survey

1.	Please answer the following questions about your department:				
	Population Served:	Fully Paid			
		Combination			
	Under 10,000	Volunteer			
	10,000 – 25,000				
	25,000 – 75,000	Rural			
	75,000 – 150,000	Suburban			
	150,000 – 250,000	Urban			
	250,000 – 500,000	ALS Service			
	Over 500,000	BLS Service			
2.	How many employees does your department have?				
3.	How many total responses does your department hand	le annually?			
4.	How many Community Based Health Care contacts d annually?	oes your department handle			
5.	What personnel in your department are responsible for	providing Community			
	based Health Care services?				
	Paramedics	EMT's			
	Other (Please List)	-			
6.	Prior to initiating Community Based Health Care servi	ces did your department			
	survey its' workforce for employee sentiment or ideas?				
		Yes No			
	If yes, would you please send a copy.				
7.	Would you like a copy of the survey results? Please provide name & address:	Yes No			

November 2, 1998

Dear Fire Service Leader,

As part of a course I am taking at the National Fire Academy, I am conducting a research project. Please take a few moments to complete the enclosed survey and FAX it to me at 813-891-6814 or return it in the enclosed stamped envelope.

Thank you for your time and valuable assistance. If you would like a copy of the survey results please note it on the survey form and provide your address.

Sincerely,	
Scott W. McGuff	

# Appendix B

# Pinellas Fire Service Community Based Health Care Services Paramedic Survey

1.	Please answer the following questions about yourself:					
	Age	Years In F	ire Service	Years As Parame	dic	
	18 – 25	0-4		0-4		
	26 – 33	5 – 9		5 – 9		
	34 – 40			10 – 15		
	40 – 47			16 - 22		
	Over 47	Over 22		Over 22		
2.	How many EMS inci	idents do you respond	to in an averag	e day?		
	1 – 3	_				
	4 – 7					
	8 – 12					
	Over 12	_				
3.			ty to aid in the dolor you believe s	letection, surveillance, hould provide that		
	County Publi	c Health Service	Pr	ivate EMS Service		
	Private Healt	h Care Provider	V	olunteer Organization		
	Fire Service	Based EMS	O	her (Please Describe)		
4.	Do you have knowled provider that has expanded their ro					
	Yes	No	)			
5.		ald you like to see you alth care services in the		as a provider of		
	Yes	No	)	Unsure		

6.	Would you be willing to expand your skills, knowledge, and abilities as a paramedic by attending additional educational opportunities to provide community based health care service?
	Yes No
7.	List up to ten (10) services that you feel you could provide as a paramedic in an expanded role in community based health care service delivery.
8.	List issues that you can think of that may have to be dealt with as a paramedic involved with an expanded role in the delivery of community based health care services.
9.	Additional comments:

November 2, 1998

Dear Pinellas Fire Service Paramedic,

As part of a course I am taking at the National Fire Academy I am conducting a research project. Please take a few moments to complete the attached survey and return it in the envelope provided.

Thank you for your time and valuable assistance. If you would like a copy of the survey results please contact me at your convenience.

Sincerely,

Scott W. McGuff 111 State Street West Oldsmar, FL 34677 813-855-1059

Appendix C

Florida Fire Service Community Based Health Care Services Employee
Involvement Survey Results

Surveys sent: Surveys received: Respondents seeking survey results:	17 12 7		Depart	ment Make All paid Combinat Volunteer	ion	10 1 1
Population in Thousands	Numbers of Departme Responding	nts		Rural Suburban Urban		3 5 9
<10 10 - 25 25 - 75 75 - 150 150 - 250 250 - 500 > 500	0 2 5 1 1 0 3			0.10		
	pers of Departments onding		Total Annual Responses		umbe eparti	ers of ments
<25 26 - 50 51 - 75 76 - 100 101 - 150 151 - 250 251 - 400 401 - 550 > 550	1 1 3 1 1 1 1 0 3		<500 501 - 1000 1001 - 1500 1501 - 2000 2001 - 2500 2501 - 3000 3001 - 5000 5001 - 7500 > 7500	0 0 1 0 0 1 2 2 6		
Number of Annual Co Based Healthcare Co		Number Respon	ers of Departmending	nts		
Unknown 0 -100 101 - 250 251 - 500 500 - 1000 1001 - 2500 2500 - 5000 > 5000		2 5 0 1 1 0 2				

Personnel Performing Community	Number of Departments
Based Healthcare Services	Responding
	1 0
Paramedics	11
EMT's	7
Other	1

Question 6. Prior to initiating Community Based Health Care services did your department survey its' workforce for employee sentiment or ideas?

Yes 4 No 6

Survey Comments:

Received verbal comment in meetings, but no written survey.

No response to question six. Have always had service.

Have three full time community health specialists-30 paramedics trained in immunizations.

Do not track contacts. Currently, only do BP screenings.

Do not have good contact statistics. Blood pressure checks in-house about 900. Immunize 300 city employees.

#### Appendix D

# Pinellas Fire Service Community Based Health Care Services Paramedic Survey Results

Surveys distributed: 435 Surveys received: 154

Age		Years in Fire Service		Years as Par	Years as Paramedic	
${18-25}$	11	0 –4	35	$-{0-4}$	34	
26 - 33	54	5 - 9	33	5 – 9	31	
34 - 40	42	10 - 15	42	10 - 15	38	
40 - 47	32	16 - 22	24	16 - 22	25	
Over 47	12	Over 22	8	Over 22	26	
Average EMS	S Responses		North Co	unty Surveys:	76	
Per Day			South Co	unty Surveys:	76	
			Unknown	ı <b>:</b>	2	
1 - 3	17		(Ulmerto	n Road was used a	s the	
4 - 7	65		dividing line between north and		and	
8 - 12	57		south).			
Over 12	12					

Question 3. If Community Based Health Care Service is defined as, "Capability that may be offered within a neighborhood or community to aid in the detection, surveillance, and support of community health", whom do you believe should provide that service?

County Public Health Service:	51	Private EMS Service:	2
Private Health Care Provider:	10	Volunteer Organization:	2
Fire Service Based EMS:	96	Other:	5

Question 4. Do you have knowledge or have you read about a fire service based EMS provider that has expanded their role into community based healthcare services?

Yes: 89 No: 63

Question 5. As a paramedic, would you like to see your role expanded as a provider of community based healthcare services?

Yes: 80 Unsure: 48 No: 26

Question 6. Would you be willing to expand your skills, knowledge, and abilities as a paramedic by attending additional educational opportunities to provide community based healthcare services?

Yes: 127 No: 22

## Appendix E

### Pinellas Fire Service Paramedic List of Possible Community Based Healthcare Services

The list of services was taken from comments provided to question number seven of the Pinellas Fire Service Community Based Healthcare Services Paramedic Survey. The list has been condensed to major categories with some sub-categories. There were a total of 450 responses to this question.

Immunizations/Vaccinations		98	22%
Wound Management		28	6%
Suturing		35	8%
Health Screening Diabetic Fitness/weight Blood pressure Cholesterol EKG Vision Hearing Skin cancer Bone density Pregnancy	11 18 6 29 11 8 5 3 1 1	94	21%
Physicals Check-ups/Insurance School	22 6	28	6%
Medication Administration/ Drug Awareness Respiratory treatment Antibiotics	14 2 2	18	4%
Home Welfare/Safety Checks Home Safety Welfare Checks Disease Control	9 21 5	35	8%
Health Education CPR/First Aid	32 7	39	9%
Community Involvement Blood drives Child I.D.	1 1	2	<1%

Basic Assessment of		73	16%
Non-emergency patients	40		
Splinting/Casting	6		
X-ray	6		
Minor foreign body	2		
removal			
Blood draws for	19		
labs/insurance			

## Appendix F

# Pinellas Fire Service Paramedic List of Possible Community Based Healthcare Issues

The list of services was taken from comments provided to question number eight of the Pinellas Fire Service Community Based Healthcare Services Paramedic Survey. The list has been condensed to major categories with some sub-categories. There were a total of 262 responses to this question.

Liability/Legal	61	23%
Cost Material Manpower	12	5%
Benefits Pay Health	30	11%
Training/Education Licensing vs. Certification Increased level of licensing	33	13%
System Abuse	6	2%
Emergency Response Delay	12	5%
Burn out/Call Volume	9	3%
Public Acceptance	9	3%
Physician/RN/Practioner Support	12	5%
Policies/Protocols	4	1%
Follow-up/Tracking/Record Keeping	6	2%
Equipment	9	3%
Exposure – Disease/Sickness	7	2%
Work Schedules Staffing Shifts	28	11%
Fire Service Acceptance	8	3%
Facilities	6	2%
Skill Dilution	7	2%
Fee Collection	2	<1%
Incentive Programs	1	<1%